



# NIH UNITE Initiative

Meeting of the Advisory Committee to the Director  
December 10, 2021

# The NIH UNITE Initiative

- Driven by events of 2020 – the disparate morbidity and mortality of the COVID-19 pandemic, the murder of George Floyd, and the killings of Asian women in Atlanta in 2021.
- This brought into sharp relief the ongoing reality of **racial and ethnic injustice** in our country, and the **responsibility of all of us to address this issue. We could not be silent.**
- We developed a **shared commitment to address structural racism** in the biomedical research enterprise.



# The NIH UNITE Initiative



- U** Understanding stakeholder experiences through listening and learning
- N** New research on health disparities/minority health/health equity
- I** Improving the NIH Culture and Structure for Equity, Inclusion, and Excellence
- T** Transparency, communication, and accountability with our internal and external stakeholders
- E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity



# Committee Updates



**U** Understanding stakeholder experiences through listening and learning  
*Monica Webb Hooper, NIMHD; Mia Rochelle Lowden, ORIP/OD; Courtney Aklin, IMOD/OD*

**N** New research on health disparities/minority health/health equity

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**T** Transparency, communication, and accountability with our internal and external stakeholders

**E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity

# U Committee Charge



**To perform a broad, systematic self-evaluation to delineate elements that perpetuate structural racism and lead to a lack of diversity, equity, and inclusion within the NIH and the external scientific community**

# U Committee: Priorities



**Solicit feedback from NIH staff and the extramural community (e.g., RFI, listening sessions, focus groups, townhalls, anonymous options, etc.)**

- **Progress, Accomplishments**

- Completed preliminary analysis and report of the over 1100 RFI responses
- Completed 32 Internal NIH Listening Sessions
- Launched external listening sessions and completed 1 session
- Completed analysis and report for the IC data call on current DEI efforts

- **Next Steps**

- Complete listening sessions (internal and external) by February 2022

- **Metric(s) of Success**

- Hear from a wide-range of NIH staff and external stakeholders, beyond the usual suspects

# U Committee: Priorities



**Submit IC Data Request to all ICs and review responses on recent past, ongoing, and upcoming DEI activities**

- **Progress, Accomplishments**

- Received responses from all ICs
- Analysis and final report of responses is complete

- **Next Steps**

- Create materials to share the results with the NIH internal community

- **Metric(s) of Success**

- Identify and report best practices, lessons learned, and areas for collaboration across NIH. Achieve a better understanding of DEI activities across the NIH.

# U Committee: Priorities



**Conduct qualitative data analysis from listening activities (e.g., RFI, listening sessions, focus groups, etc.)**

- **Progress, Accomplishments**

- Completed a preliminary analysis of the RFI
- Completed a preliminary analysis of listening sessions with scientific staff

- **Next Steps**

- Complete RFI final report for public release in early 2022
- Complete analysis of listening session data and report in spring 2022

- **Metric(s) of Success**

- Reports provide insights to guide and support the work of UNITE





# NIH UNITE Initiative

U Committee – Preliminary RFI Findings  
December 10, 2021

# Outline



## Overview, Approach, Team, and Results

Preliminary Cross-Cutting Findings

Next Steps

# Overview: The RFI solicited input on how NIH can advance EDI and advance health disparities research

## Overview

- **Why:** To solicit feedback on how NIH can advance racial equity, diversity, and inclusion (EDI) and expand research to eliminate or lessen health disparities and inequities
- **What:** 4 categories and 9 sub-categories for input
- **Who:** Open to the public, organizations were encouraged to respond, though individuals could also submit responses
- **When:** RFI submissions were accepted from March 1<sup>st</sup> to April 23<sup>rd</sup> 2021
- **Where:** RFI submissions were accepted via an online portal and via email

## RFI Categories

All Aspects of the  
Biomedical Workforce

Policies and  
Partnerships

Research Areas

Further Ideas

# Approach: The RFI responses are being analyzed in a phased approach using the socioecological model (SEM)

## Approach Overview

- A 3-phased process is being used to identify trends, topics, and themes
- Coding was framed using SEM, utilizing both deductive and inductive coding
- A more detailed analysis will be available after Phases 2 and 3 have been completed



## 3-Phase Data Analysis Process

✓ Completed

Upcoming: full report expected for release in early 2022

1. Initial Qualitative Analysis

2. Analysis within the RFI Tool

3. Final Analysis



# Team: RFI Coding Team is made up of staff volunteers and U Committee leads from across NIH

## NIH Staff Volunteers

- Melissa Antman (OD)
- Teresa Estrada (NCI)
- Jamie Gulin (NHLBI)
- Shadab Hussain (NCATS)
- Doug Joubert (NLM)
- Anu Sharman (NCI)
- Laura Thomas (NIEHS)
- Ryan Richardson (OD)

## U Comm. Staff Leads

- Cara Finley (OD)
- Melissa Laitner (OD)
- Vanessa Marshall (NIMHD)
- Kamilah Rashid (OD)

# U Committee Members & Staff Leads

## U Committee

- **Courtney Aklin (IMOD/OD)**
- **Mia Rochelle Lowden (ORIP/OD)**
- **Monica Webb Hooper (NIMHD)**
- Shelli Avenevoli (NIMH)
- Dexter Collins (FIC)
- Laura Cooper (NIAMS)
- Kevin Davis (CIT)
- Charlene Le Fauve (COSWD/OD)
- Leslie Littlejohn (NIAMS)
- Troy Muhammad (NCI)
- Ian Myles (NIAID)
- Roland Owens (OIR/OD)
- Kelly Ten Hagen (NIDCR)
- Brian Trent (NEI)
- Della White (NCCIH)

## U Comm. Staff Leads

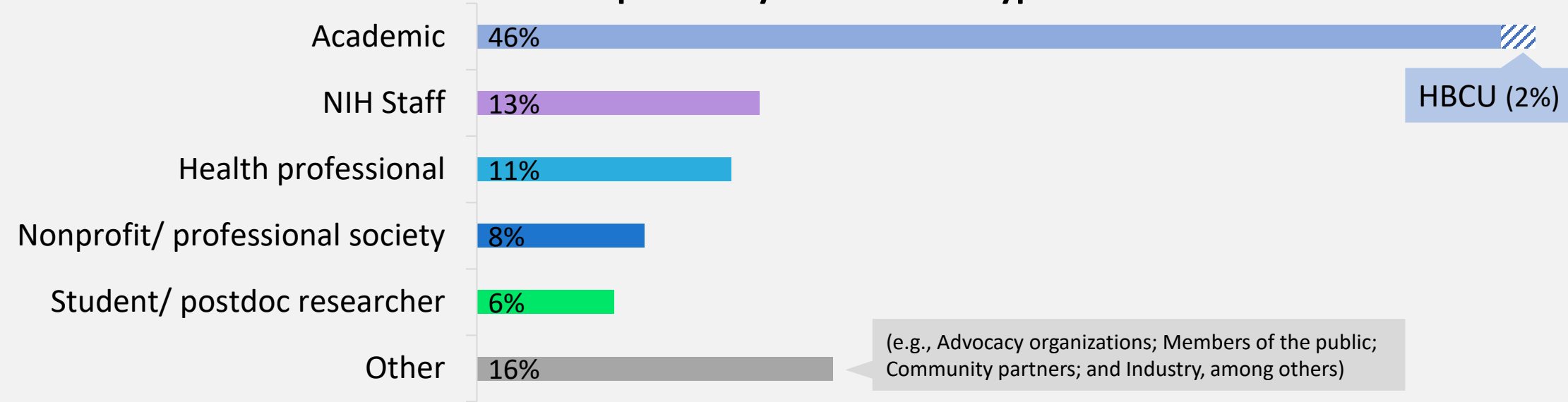
- Cara Finley (OD)
- Melissa Laitner (OD)
- Vanessa Marshall (NIMHD)
- Kamilah Rashid (OD)

# Results: The RFI received more than one thousand responses that spanned stakeholder type

## RFI Results

- **Over 1,100 responses**
- **Wide-range of respondents** spanning across sectors, with the majority of respondents from academia

Responses by Stakeholder Type



# Outline

Overview, Approach, Team, and Results



**Preliminary Cross-Cutting Findings**

Next Steps



# Three preliminary cross-cutting findings emerged



## 1. Actions Beyond Words



## 2. Enhance Programs & Activities



## 3. There is no “easy button”

A small number of respondents perceived no issues with racism or EDI at NIH and the broader biomedical community, demonstrating that there is still a misunderstanding or denial of structural racism among some NIH stakeholders

# Deeper dive into preliminary cross-cutting findings (1 of 3)

## 1. Actions Beyond Words

- NIH is saying the right things to acknowledge structural racism, but for years NIH has had data demonstrating the:
  - **Lack of diversity** in the workforce, particularly at leadership levels
  - **Funding discrepancies** among NIH granteesYet **nothing has changed**, the disparities persist as evidenced by the data
- There is a **lack of tangible actions** to address the historical societal, institutional, organizational, and governmental structures that exist to influence disparities within the biomedical workforce as barriers; in order to dismantle structural racism **specific actions are needed to change existing structures**

*Note: detailed preliminary findings by sub-category can be found in the appendix*

# Deeper dive into preliminary cross-cutting findings (2 of 3)

## 2. Enhance Programs & Activities

- Existing NIH initiatives are well-designed but often **under-resourced**, NIH should:
  - **Increase funding and support** for these initiatives
  - **Improve monitoring and program evaluation**
- **Communication and coordination** across initiatives working to address EDI could be improved
- Many respondents feel that NIH should **expand UNITE to be inclusive of all dimensions of diversity**, by including other underrepresented groups (e.g., AAPI) and by including other factors beyond race (e.g., socioeconomic status, geographical region, disability, gender, with a focus on intersectionality)

*Note: detailed preliminary findings by sub-category can be found in the appendix*

# Deeper dive into preliminary cross-cutting findings (3 of 3)

## 3. There is no “easy button”

- Ending structural racism will require a **multifaceted approach** that reviews and redefines NIH’s **policies, processes, practices, and cultural norms** while ensuring accountability, sustainability, and transparency
- Proposed solutions reimagine how NIH approaches:
  - Grantmaking and research priorities
  - Recruitment, hiring, training, retention, and promotion practices
  - Mentorship, sponsorship, and networks
  - Communications, support, and partnerships with underrepresented groups and communitiesAmong other aspects to help reset the practices and culture at NIH and the biomedical community

*Note: detailed preliminary findings by sub-category can be found in the appendix*



# Outline

Overview, Approach, Team, and Results

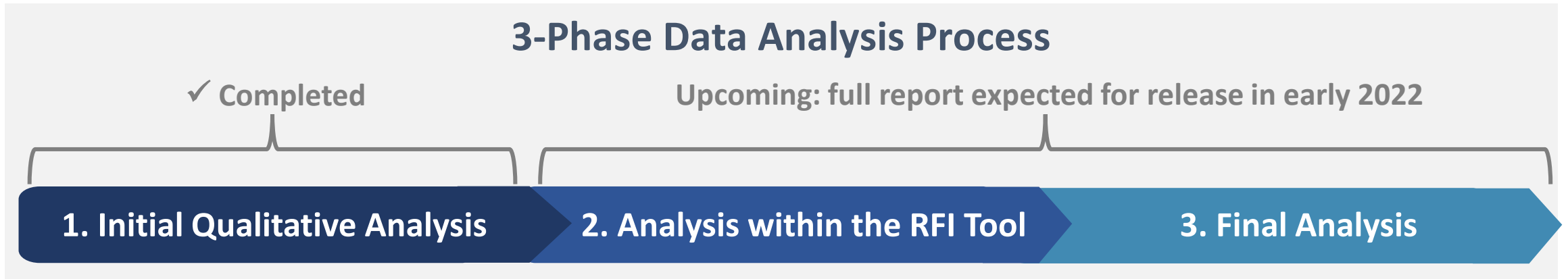
Preliminary Cross-Cutting Findings



**Next Steps**

# Next Steps

- Continue to conduct analysis within the RFI Tool
- Analyze and synthesize findings for full report (expected in early 2022)
- Triangulate findings with other data (e.g., U Comm. listening activities findings, climate survey results)



# Committee Updates



**U** Understanding stakeholder experiences through listening and learning

**N** New research on health disparities/minority health/health equity  
*Anna María Nápoles, NIMHD; Robert Rivers, NIDDK; Michele K. Evans, NIA*

**I** Improving the NIH Culture and Structure for Equity, Inclusion, and Excellence

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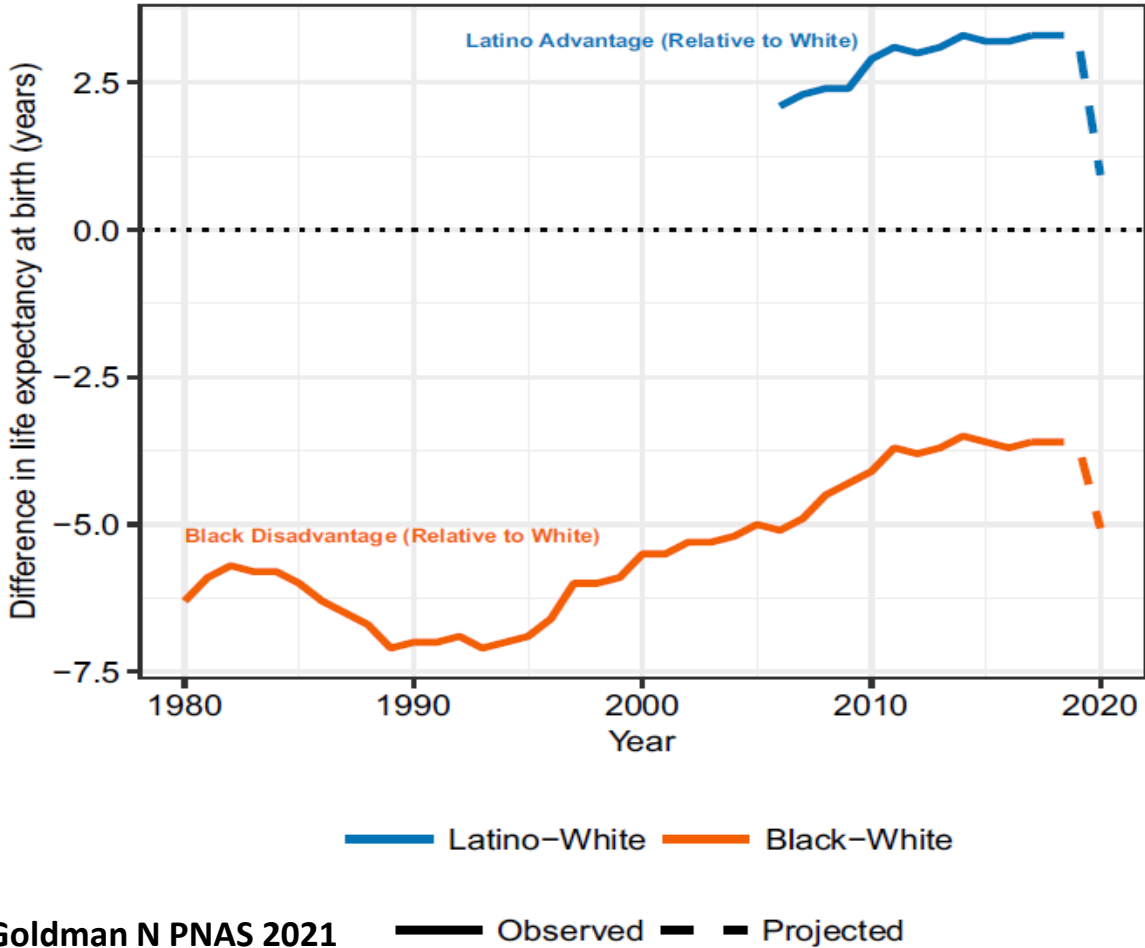
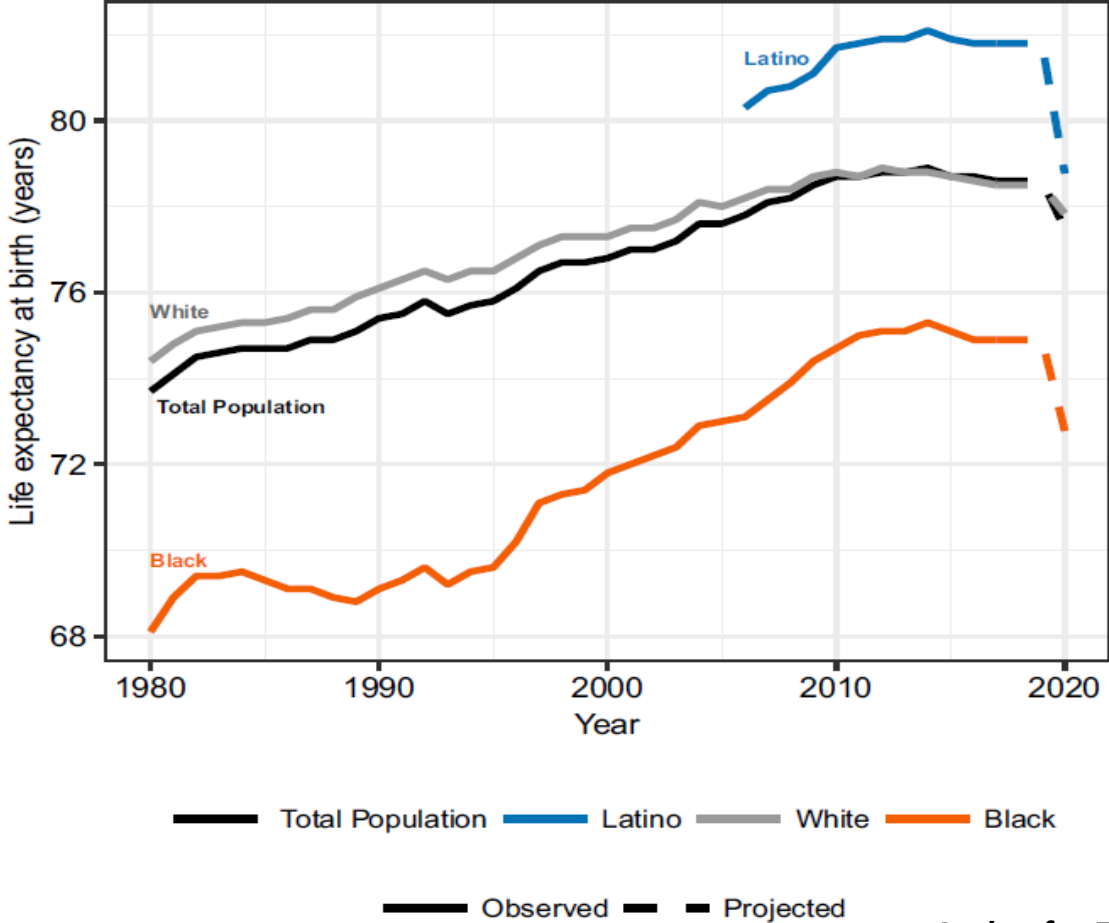
# N Committee Charge



**To address long-standing health disparities and issues related to minority health to advance health equity in the United States by ensuring NIH-wide transparency, accountability and sustainability in marshaling resources for HD/MH/HE research**



# Reductions in U.S. Expectancy due to COVID-19



Andrasfay T & Goldman N PNAS 2021

# N Committee: Priorities

Achieve equitable support for HD/MH/HE research  
to measurably reduce health inequities



- Progress, Accomplishments

- Transformative Health Disparities Research: 2 FY21 Common Fund FOAs- 11/174 grants funded **success rate= 6.3 %; catalyzed many unfunded meritorious apps that can be funded by ICs**
- WG convened to develop FY23 Common Fund FOAs, Listening Sessions underway

- Next Steps (Ongoing)

- **Presented to Unite ICD Implementation Committee Request for additional funding for FY23 Common Fund FOAs**
- Identify strategies to:
  - Develop additional FOAs that focus on IC-specific disease/topic areas
  - Increase CBPR and research on SDoH, structural racism
  - Leverage large cohort studies funded by NIH to increase HD/MH/HE research

- **Metric(s) of Success**

- Increased and sustained funding of HD/MH/HE research

# N Committee: Priorities



**HD/MH/HE Research Investment Analytic Data Dashboard tracks trends of research investments with key performance indicators and metrics to set and monitor targets**

- **Progress, Accomplishments**
  - [Trans-NIH N Committee Data Working Group](#) of portfolio analysis experts characterizing the HD/MH/HE research portfolio to develop dashboard prototype
- **Next Steps**
  - Resources approved to further develop prototype, operationalize and produce the dashboard
- **Metrics of Success**
  - Data informed approach to increase funding, including FOAs, for programmatic prioritization of HD/MH/HE
  - Inclusion of relevant RCDC, MeSH concepts and terms, clinical trials, longitudinal studies, funded and unfunded grants, funding mechanisms
  - Ability to track progress against NIH MH/HD/HE Strategic Plan goals

# N Committee: Priorities

Analyze, coordinate and improve business process from ideation to funding to achieve equity

## Progress, Accomplishments

Identifying expertise and resources required for analysis of business model using the data dashboard and other approaches

## Next Steps

**2010: P.L. 111-148, the [Patient Protection and Affordable Care Act](#)** gave the NIMHD authority to plan, review, coordinate, and evaluate the minority health and health disparities research and activities conducted and supported by the NIH Institutes and Centers.

**Immediately Empanel Trans-NIH HD/MH/HE Research Coordinating Working Group that is resourced and reports to the NIMHD Director.**

**Develop transition plan for 'N' Committee activities to Trans-NIH HD/MH/HE Research Coordinating Working Group**

## Metric(s) of Success

IC-specific plans to: a) increase racial equity in funding; b) IC director led increased support in all ICs for HD/MH/HE research; c) remedy underrepresentation of populations disproportionately affected by target conditions in funded studies.



# Thanks to N Committee Members

Michele K. Evans (NIA)  
Anna María Nápoles (NIMHD)  
Robert Rivers (NIDDK)  
Gwen Bishop (NIDCD)  
Vence Bonham (NHGRI)  
Juanita Chinn (NICHD)  
Janine Clayton (ORWH/OD)  
Christine Cutillo (NCATS)  
Kathy Etz (NIDA)  
Justin Hentges (AoU/OD)  
Daryl Holder (CC)  
Jasmine Kalsi (NCATS)  
Nathan Moore (NIGMS)  
Joan Romaine (NIAAA)  
Asha Storm (NIBIB)  
Shannon Zenk (NINR)  
+Marzjah Esther (OD)



# Committee Updates



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**I** Improving the NIH Culture and Structure for Equity, Inclusion, and Excellence  
*Trevor Archer, NIEHS; Marie A. Bernard, COSWD/OD, NIA; Alfred Johnson, OM/OD*

**T** Transparency, communication, and accountability with our internal and external stakeholders

**E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity

# I Committee Charge



**To change the NIH organizational culture and structure to promote diversity, equity, and inclusion throughout the NIH workforce**

# I Committee: Priorities



## Revise Manual Chapter 1311 - Preventing and Addressing Harassment and Inappropriate Conduct

- **Progress, Accomplishments**

- Received feedback from all stakeholders and Anti-Harassment Steering Committee representatives; Published October 2021

- **Next Steps**

- Promote awareness to reduce incidents and reporting where necessary

- **Metric(s) of Success**

- Alteration in the number/type of reports

# I Committee: Priorities



**Publication of reliable and accessible data regarding the demographics of the NIH workforce by sex, race, ethnicity, accessibility, and job grade**

- **Progress, Accomplishments**

- Data published on EDI website (May14, 2021)  
<https://www.edi.nih.gov/people/resources/advancing-racial-equity/nih-workforce-profile-fy21q02>
- EDI anticipates posting NIH's 4th quarter 2021 demographic data on the website in early January.

- **Next Steps**

- Refine and expand data, allow specific use (e.g., make queries possible by ICs) - 2022

- **Metric(s) of Success**

- Utilization of data in developing hiring/retention/promotion programs across ICs; Winter 2021/Spring 2022

# I Committee: Priorities



**Establish an NIH Anti-Racism Steering Committee (ARSC) and work collaboratively with the committee to develop racial & ethnic equity plans (REEPs) for each IC and DEIA PMAP elements for each ICD**

- **Progress, Accomplishments**

- ARSC established Spring 2021; ~ 500 members

- **Next Steps**

- Established ARSC/SME and task-specific working groups (Summer 2021)
- Established PMAP element for ICDs and SLs

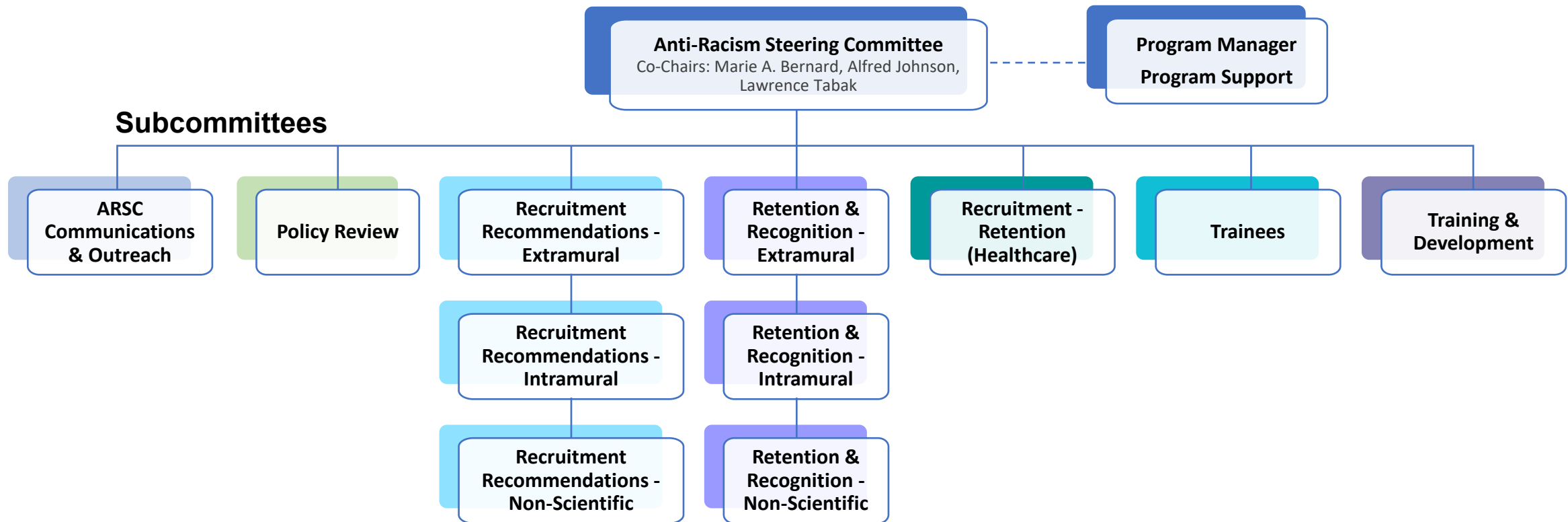
- **Metric(s) of Success**

- IC representation in ARSC; REEP guidance provided(Fall 2021)
- Development of IC REEPs (Winter 2021/Spring 2022)



# I Committee: Priorities

## Anti-Racism Steering Committee





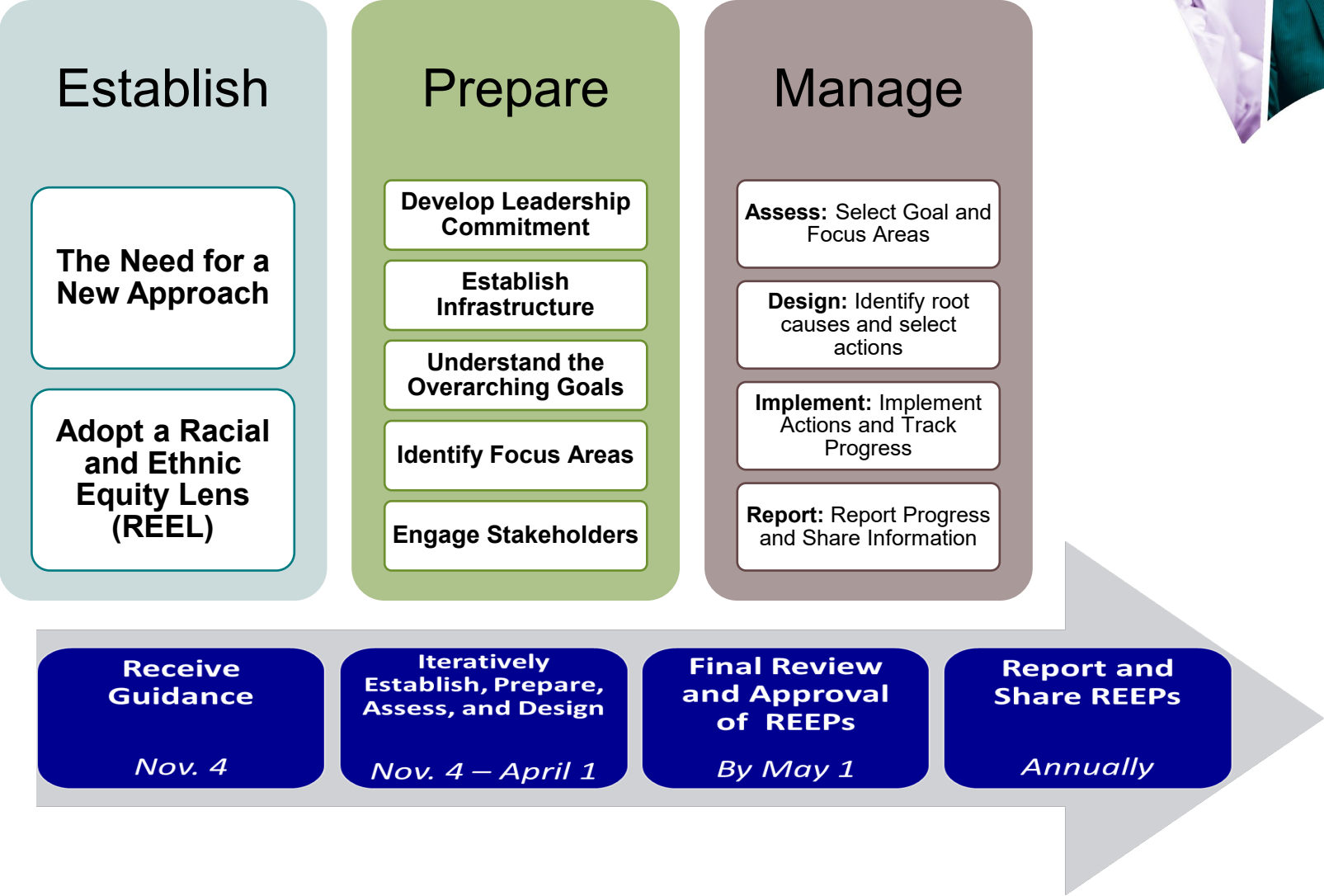
# I Committee: Priorities

## NIH Executive Performance Requirements

Develop a performance expectation for IC Directors to be accountable for equity, diversity, and inclusion efforts – Language under development, completion by October 2021 for inclusion in FY22 performance plans. – This element will include the expectation of Racial & Ethnic Equity Plans for all ICs by 2022



# Racial and Ethnic Equity Plan Process



# Committee Updates



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***Sadhana Jackson, NCI, NINDS; Amy Bany Adams, NINDS; John Burklow, IMOD/OD***
- E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity

# T Committee Charge



**To ensure transparency, accountability, and sustainability of all UNITE efforts amongst NIH Internal and External Stakeholders.**

*Includes coordinating NIH-wide efforts and communicating findings from UNITE committees to internal and external stakeholders and the general public, and facilitating communication among NIH Institutes, Centers, and Offices*

# T Committee: Priorities



**Develop a webpage to communicate NIH efforts including a data dashboard to highlight and be transparent with NIH and UNITE data**

- **Progress, Accomplishments**

- Advised on, helped to develop the NIH *Ending Structural Racism* webpage
- High-level data dashboard – **will go live 12.10.21**

- **Next Steps**

- Quarterly updates of high-level internal, external DEIA data on NIH *ESR* webpage

- **Metric(s) of Success**

- Acknowledge NIH and UNITE progress through fully transparent resources/links to granular data
- Enhanced trafficking to NIH data webpages, especially around marketing of UNITE efforts



# T Committee: Priorities



**Disseminate and bolster NIH efforts to advance racial and ethnic equity through Town Halls, an intranet page, and a UNITE “toolkit” (slides, best practices, etc...)**

- **Progress, Accomplishments**

- Supported 2 NIH Town Halls on Advancing Racial and Ethnic Equity at NIH and beyond
- Launching NIH *Ending Structural Racism* (ESR) Intranet with UNITE “toolkit” – **will go live 12.10.21**

- **Next Steps**

- Define best practices provided through the toolkit, shared with external community
- Support twice yearly NIH Town Halls and quarterly updates of the NIH ESR Intranet

- **Metric(s) of Success**

- Constructive feedback received on accessibility of central hub for ESR resources
- Enhanced trafficking to NIH intranet, especially around marketing of UNITE efforts



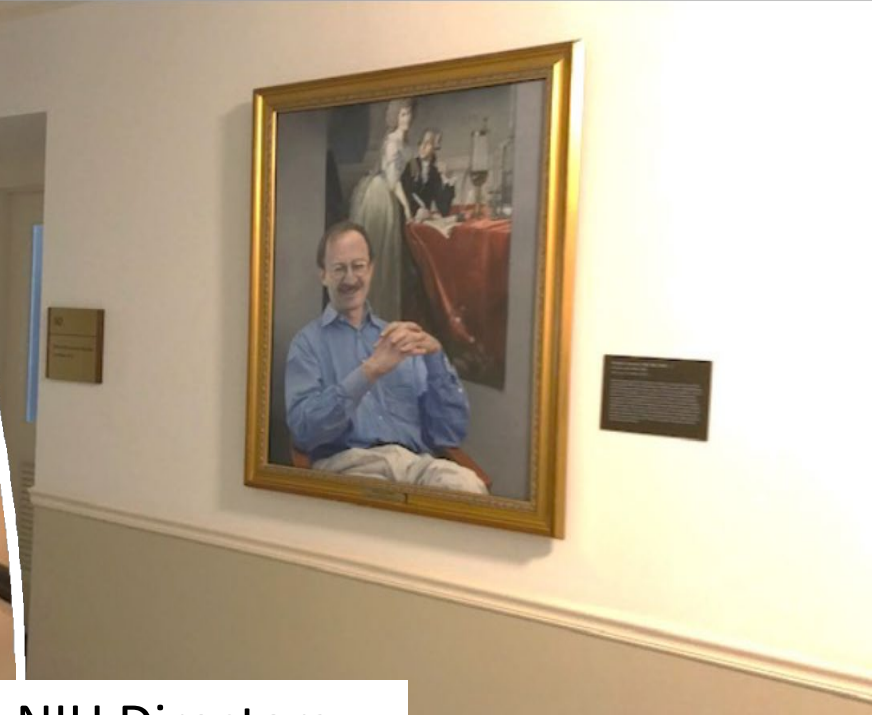
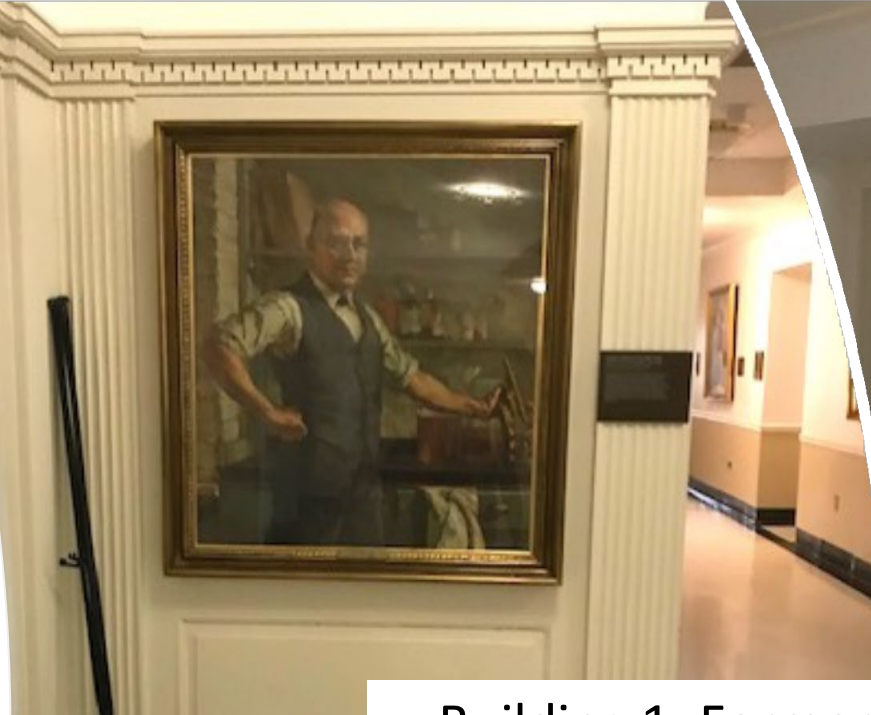
# T Committee: Priorities



- **The Power of an Inclusive Workplace Recognition Project:** Centered on broadening artworks amongst NIH and its global digital spaces - acknowledging and appreciating diversity of the NIH workforce and larger biomedical enterprise. Also, to promote inclusivity and belonging of underrepresented staff for recruitment and retention
- **Progress, Accomplishments**
  - Developed concept design with NIH medical arts for physical and electronic campaigns.
  - Artwork installation in building 10 with filming with NIH leadership
  - Additional artwork installation planned installation in buildings 1, 10 and 31 – **by 12.15.21**
- **Next Steps**
  - Formal public rollout of the campaign– **by 12.15.21**
- **Metric(s) for Success**
  - Physical campaign evident at all NIH campuses
  - Fully operational online digital campaign to recognize importance of displaying diversity to larger biomedical network

## The Power of an Inclusive Workplace Recognition Project:

Centered on broadening artworks amongst NIH and its global digital spaces - acknowledging and appreciating diversity of the NIH workforce and larger biomedical enterprise. Also to promote inclusivity and belonging of underrepresented staff for recruitment and retention



Building 1: Former NIH Directors





# The Power of an Inclusive Workplace Recognition Project:



Building 10 – Few Diverse Exhibits



# The Power of an Inclusive Workplace Recognition Project:

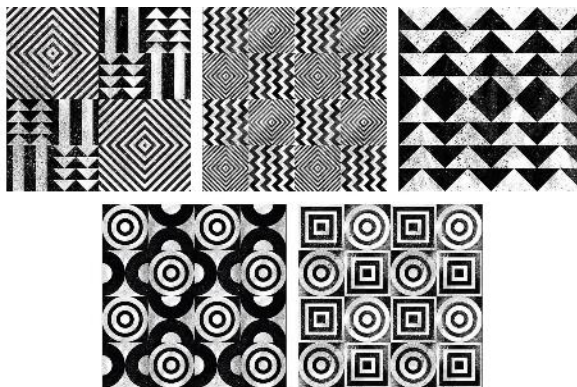


## Expanded NIH Color Palette:



## Pattern Development

- Provides a suite of patterns to international backgrounds
- Adds dynamic texture and visual interest
- Allows for a variety of uses from backgrounds to murals to shared ideas work



- Expanded NIH color palette: colors are expressive, inclusive, and non-ethnic specific when used properly.
- Contemporary diverse portrait illustrations of NIH staff
  - Crafted from NIH directory or submitted by staff
- All staff represented
- Graphical illustrations with notable quotes

**Not everything  
that is faced can  
be changed,  
but nothing can  
be changed until  
it is faced.**

**James Baldwin**  
Novelist, Playwright, Essayist, Poet, and Activist

**TOGETHER  
WE'RE STRONGER**

## NIH UNITE INITIATIVE

The NIH Unite Initiative is a collaborative effort to create a more inclusive and equitable workplace for all NIH employees and staff. It is a commitment to diversity, equity, and inclusion, and to the health and well-being of the nation.

For more information, please visit:  
[www.nih.gov/diversity/equity/inclusion](http://www.nih.gov/diversity/equity/inclusion)



NIH | Division of Intramural Research





The Power of an Inclusive Workplace Recognition Project:  
Building 10, Warren G. Magnuson Clinical Center  
**Leadership walk-through**

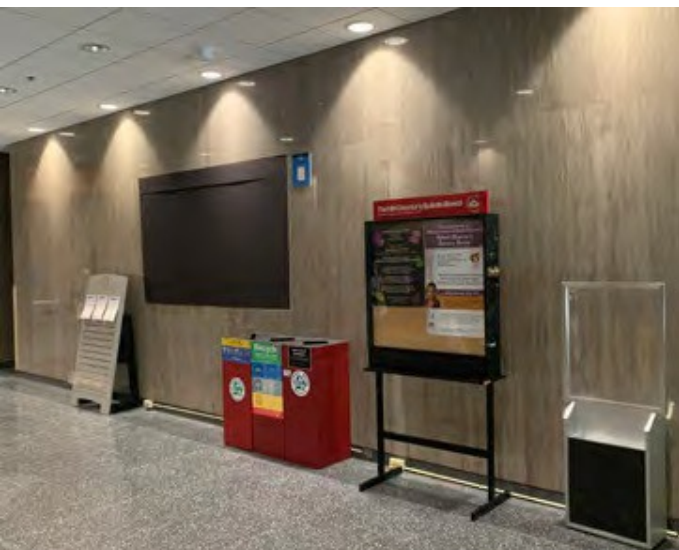




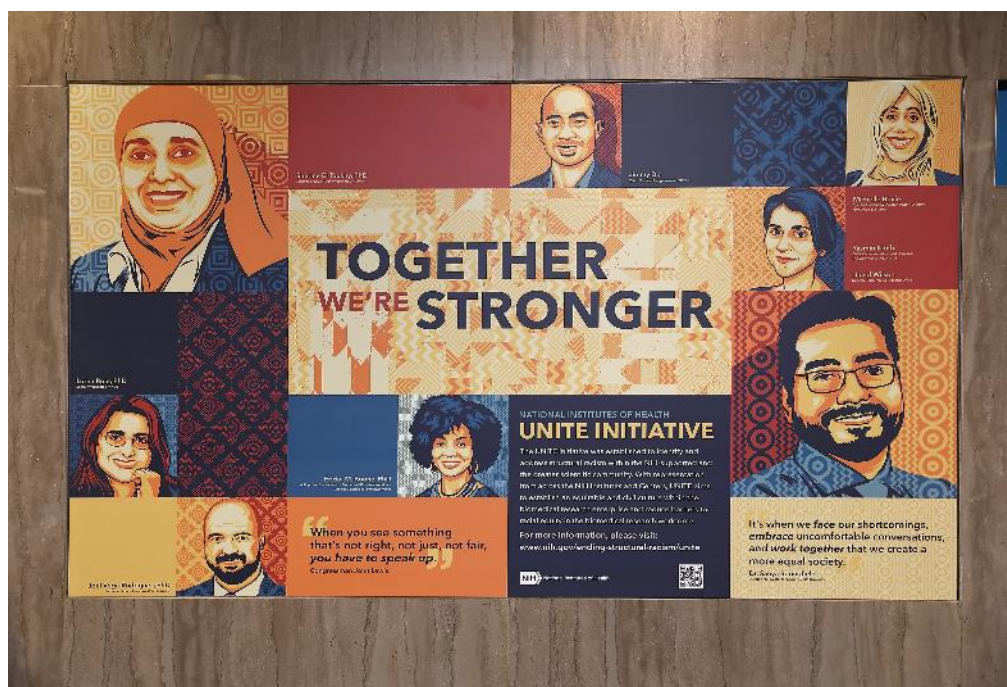
# The Power of an Inclusive Workplace

## Recognition Project: Building 10, B1 Cafeteria





Before



After




After with Recognition



The Power of an Inclusive Workplace Recognition Project: Buildings 31 and 1



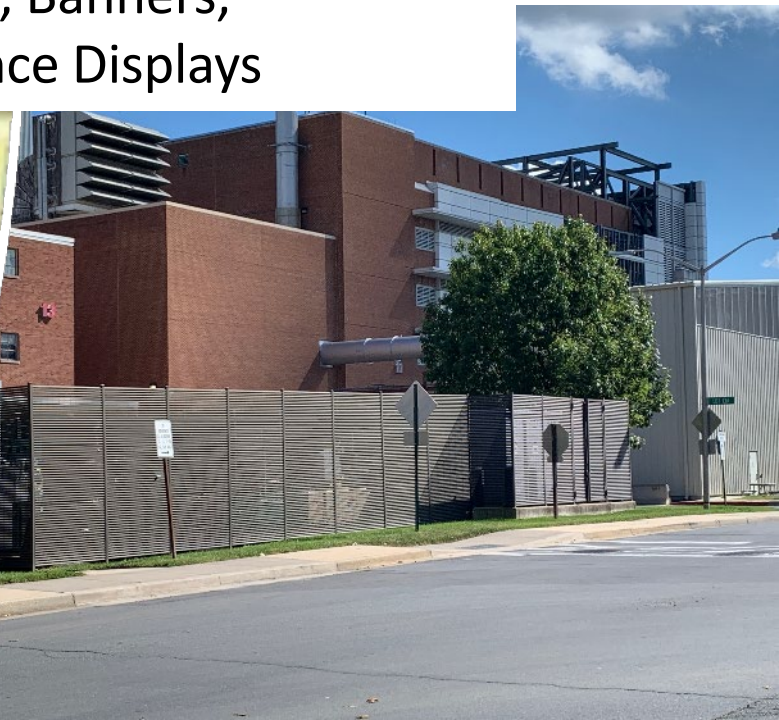
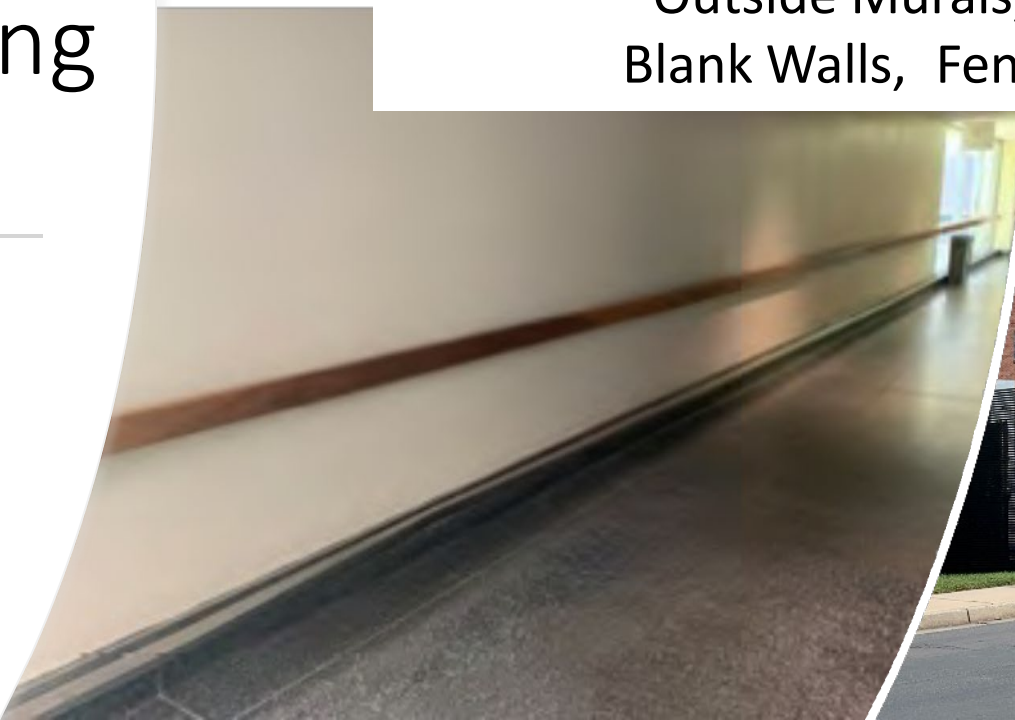


# The Power of an Inclusive Workplace Recognition Project: Upcoming Installations

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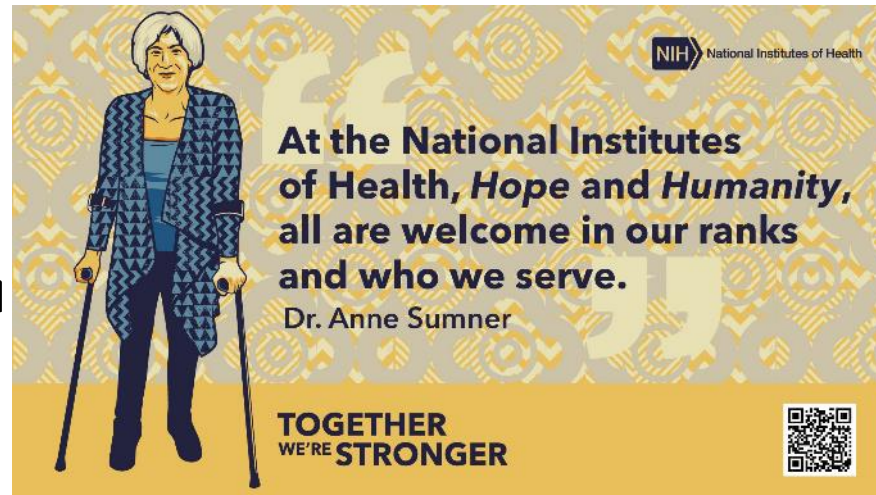
Outside Murals, Banners,  
Blank Walls, Fence Displays





# The Power of an Inclusive Workplace Recognition Project: Future

- Online Digital Campaign/Social Media Campaign
- Potential influences on the larger biomedical workforce
  - Trainees
  - Current and future STEM and STEM support professionals
  - Global academic institutions



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**T** Transparency, communication, and accountability with our internal and external stakeholders

**E** Extramural Research Ecosystem: Changing Policy, Culture, and Structure to Promote Workforce Diversity

***Anna E. Ordóñez, NIMH; Ericka Boone, OER/OD; Jon Lorsch, NIGMS***

# E Committee Charge



**To perform a broad systematic evaluation of NIH extramural policies and processes to identify and change practices and structures that perpetuate a lack of inclusivity and diversity within the extramural research ecosystem**

*Includes developing strategies to address funding disparities and increase applications that would support individuals from under-represented groups*



# E Committee: Overall Update



- **Progress, Accomplishments**

- Developed initial set of recommendations for new initiatives, program expansions and policy changes
- Discussed these with the UNITE Committee, NIH leadership (October 2021 Leadership Forum), and the NIH Extramural Activities Working Group

- **Next Steps (Winter 2021/2022-Summer 2022)**

- Begin implementing proposals, starting with highest priority

- **Early Metric(s) of Success**

- # FOAs issued; # applications/FOA; # grants awarded
- # policy changes implemented
- # additional programs/initiatives launched
- Increase in diversity of NIH-funded investigators and trainees



# E Committee: Priorities

## Increasing Career Opportunities for URGs

- **Examples of implementation priorities:**

- Expand Science Education Partnership Awards (SEPA) Program to be trans-NIH
  - preK-12 diversity-focused career enhancement grants
- Strengthen diversity and mentoring language in parent training grant and fellowship FOAs
  - Piloted by NIGMS in training grants and endorsed by ACD already
- Increase use of diversity supplements for SBIR/STTR awards
  - Enhanced outreach and publicity, e.g., via NIH-funded diversity programs
  - "Matchmaking" service
- Incorporate BRAIN initiative Plan to Enhance Diverse Perspectives (PEDP) into NIH research FOAs
  - Already being piloted in some ICs' FOAs in addition to BRAIN



# E Committee: Priorities

## Promote Extramural Institutional Culture Change in Support of Inclusivity and Equity

- **Examples of implementation priorities:**

- Launch program to fund Excellence in DEI Investigator's Grants
  - Offset "diversity tax"
  - Fund investigator's continued DEI efforts as well as their research
- Launch program to provide support for institutions to conduct objective climate assessments and critical self-studies, then develop action plans based on the results
  - Literature indicates these are critical steps in positive culture change
- Launch prize for institutional innovation and advancement in DEI
  - Reward progress & disseminate best practices
  - Modeled on ORWH Enhancing Faculty Gender Diversity Prize



# E Committee: Priorities

## Identify and Change NIH Processes and Policies Contributing to Inequities in Extramural Funding



- **Examples of implementation priorities:**

- Develop and launch training program for SROs and POs to reduce implicit bias and enhance equity and inclusivity of NIH interactions with extramural community
- Develop guidance to help ICs enhance the diversity of PIs funded in their research portfolios
- Improve review criteria descriptions to decrease possible sources of bias, e.g., institutional and reputational bias (Environment and Investigator)

# E Committee: Priorities

## Build and Sustain Research Capacity at Minority-Serving Institutions

- **Examples of Implementation Priorities:**

- S10 Instrumentation grant program for minority-serving institutions
  - ICs can sign on and fund awards
- Targeted institutional training grants
  - E.g., HBCUs, TCUs
- Expand Sponsored Programs Administration Development (SPAD) grants program
- Entrepreneurial training program
  - Increase commercialization and SBIR/STTR applications and awards
- Organize yearly meeting between NIH leadership and MSI leaders
  - Analogous to yearly AAMC medical school deans meeting





# The NIH UNITE Initiative

## UNITE Co-Chairs

- **Marie A. Bernard**, NIH Office of the Director/Office of the Chief Officer for Scientific Workforce Diversity
- **Alfred Johnson**, NIH Office of the Director/Office of Management
- **Lawrence Tabak**, NIH Office of the Director

## UNITE Program Manager

- **Vacant**

## UNITE Program Support

- **Brittany Chao**, NIH Office of the Director
- **Marzjah Esther**, NIH Office of the Director



U

Courtney Aklin (IMOD/OD)  
Mia Rochelle Lowden (ORIP/OD)  
Monica Webb Hooper (NIMHD)  
Shelli Avenevoli (NIMH)  
Dexter Collins (FIC)  
Laura Cooper (NIAMS)  
Kevin Davis (CIT)  
Leslie Littlejohn (NIAMS)  
Troy Muhammad (NCI)  
Ian Myles (NIAID)  
Roland Owens (OIR/OD)  
Kelly Ten Hagen (NIDCR)  
Brian Trent (NEI)  
Della White (NCCIH)  
+Cara Finley (IMOD/OD)  
+Melissa Laitner (OD)  
+Vanessa Marshall (NIMHD)  
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# Questions?